

## STATE OF NEW HAMPSHIRE 2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

## PLEASE PRINT

I. Name of Lobbyist(s):	Paul A. Worsowicz; Heidi L. Kro	11
II. Name of Lobbyist's pare	tnership, firm or corporation, if any:	
	GALLAGHER, CALLAHAN & 214 North Main Street, Con	
603-228-1181	603-226-3477	worsowicz@gcglaw.com
(Telephone)	(Fax)	(Email)
	(Choose one – file separate reports for tions which are not attributable to any o	each client, OR you may file a separate report for one client.)
All reportable transac	ctions occurring in the month prior to the r	eporting date relative to the following client.
	LIFE COPING,	
(Fi	ull Name of Client as it appears on the Lo	bbyist Registration Form)
All reportable transactunrelated to any particular		ist's family), or the lobbying firm listed below which are
IV. Date of Report:	April 26, 2017 🗵	July 26, 2017 🔲
<del>-</del>	from date of registration to 3/31/17	activity from 4/1/17 to 6/30/17
•	_	_
	October 25, 2017	January 24, 2018 □
activi	ty from 7/1/17 to 9/30/17	activity from 10/1/17 to 12/31/17
	received and no reportable transaction ete just this form and submit it to the Secre	s made since the last report. etary of State's Office, State House, Room 204,
VI. Check if additional report X If you have received	ports are attached: fees or made expenditures, you must file A	Addendum A – Fees and Expenses
If you have paid an he Expense Reimbursem	nent	nust file <b>Addendum B</b> – Report of Honorariums or ns, you must file <b>Addendum C</b> – Political Contribution
Sworn Statement/Affirmati I have read RSA 15, RSA 15 to the best of my knowledge	-B and RSA 664 and hereby swear or affin	rm that the foregoing information is true and complete
(Signature of Lobbyist)	rowy	4-20-17 (Date)
( <del>g</del>	,	•
Paul A. Worsowicz (Print Name of lobbyist)		RECEIVED

APR 2 6 2017

NEW HAMPSHIRE DEPARTMENT OF STATE



## STATE OF NEW HAMPSHIRE Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) Paul A. Worsowicz; Heidi L. Kroll						
II. Name of lobbyist's partnership, firm or corporation, if any:						
GALLAGHER, CALLAHAN & GARTRE	LL, P.C.					
(Name of partnership, firm or corporation						
III. Name of Client LIFE COPING, INC.	Date A	pril 26, 2017				
IV. Fees Received Indicate the gross amount of all fees received from the client identified above t lobbying, including fees for services such as public advocacy, government relaincluding research, monitoring legislation, and related legal work. The gross feby any expenses:	tions, or pub	lic relations servi	ces,			
a) Total of all fees received in this reporting period	ā	n) \$	6,600.00			
b) Total of all fees received this calendar year, prior to this reporting period. (This should equal the total prior monthly reports for this calendar year.)	t	o) \$ 	0.00			
c) Total of all fees received to date. (Add lines a and b)	C	e) \$ 	6,600.00			
d) Indicate the amount of any such fees that are due, but have not yet been paid.	C	1) \$	0.00			
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to refees. Separate reports are to be filed for expenditures made relative to each clobbyist(s)/firm that are unrelated to any one client a separate report may be are to be reported in one of three categories of expenses: (a) the aggrega reporting period for salaries, benefits, support staff, and office expenses; (expenses where the expenditure was of \$25.00 or less (for example: meals put the cost was \$25.00 or less, purchase of a pen with a value of less than \$10 the purchase of a ceremonial object given to a person being lobbied with a value statement of each individual expenditure made during this reporting period of covered by (a) (for example: purchase of a meal with value of greater than \$2 given to the subject of lobbying with a value greater than \$25, but not great legislative reception). Expenses for honorariums, expense reimbursement, or on separate addendums and should not be reported on Addendum A.	ient and if ex filed for the te total of al b) the aggre- urchased dur- nat is given to of \$25.00 or greater than 5, purchase of ter than \$50	penditures are male lobbyist(s)/firm. I expenses paid of gate total of all ing a business lure the person being less); and (c) ar \$25.00 for any puriful a ceremonial of the restaurant expense.	ade by the Expenses during the individual nch where g lobbied, n itemized urpose not bject to be nses for a			
<ul> <li>a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.</li> <li>b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.</li> </ul>	a) \$ b) \$	4,8	75.00			
c) Total of all itemized expenditures reported in detail in section VI.	c) \$ 	1	00.00			

d) Total expenses for this reporting period. (Add lines a, b and c.)	d) \$	4,975.00
e) Total of expenses paid this calendar year, prior to this reporting period.  (This should be the amount on line f of addendum A for last month's report.)	e) \$	0.00
f) Total of all expenses year to date.	f) \$	4,975.00
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from lobbying fees period, including by whom paid or to whom charged.	during th	ais reporting
Paid to:	A	mount
State of NH	_	100.00
	- <del>\$</del>	-
	_ 🐧 _	
	_ \$ _	
	— ¥ —-	
Sworn Statement/Affirmation by Lobbyist		
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that the form is true and complete to the best of my knowledge and belief.	oregoing	information
1/2016/oranie 4	ِ  20 م	17
(Signature of lobbyist)		
Paul A. Worsowicz		
(Print Name of Lobbyist)		

Lobbyist Fees & Expenses, Addendum A – Page 2 Client: LIFE COPING, INC.

## State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

Statement of Income and Expenses for:					
Name of Lobbying partnership, firm or corporation: GALLAGHER, CALLAHAN & GARTRELL, P.C.					
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client): Life Coping, Inc.					
Date of Report (che	ck one):				
April 26, 2017 🔀	July 26, 2017 □	October 25, 2017	January 24, 2018 □		
	RSA 15-B, RSA 664, the Sns submitted with that State		spenses described above, and the Addendum forms being		
1 Addendum A(s	3).				
0 Addendum B(s	3).				
_0_ Addendum C(s	3).				
I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief.					
(Signature of Lobby	rist)		4)20)17 (Date)		
Heidi L. Kroll					
(Print Name of lob)	byist)				